

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
200 Colorado Derby Building  
Wichita, Kansas 67202

WELL PLUGGING RECORD  
K.A.R.-82-3-117

API NUMBER 15-095-202,718 <sup>0001</sup>

LEASE NAME Noris

WELL NUMBER 1

SPOT LOCATION SW-NW-SE <sup>NE</sup> <sub>AUB</sub>  
<sub>KCC</sub>

SEC. 33 TWP. 30S RGE. 7 (XXX) (W)

COUNTY Kingman

Date Well Completed 10/85

Plugging Commenced 12/3/85

Plugging Completed 12/12/85

15-095-20271-0000  
TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 30 days.

LEASE OPERATOR M.T.M.

ADDRESS Spivey, KS 67142

PHONE # (316) 785-4011 OPERATORS LICENSE NO. 6236

Character of Well D&A  
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? yes

Which KCC/KDHE Joint Office did you notify? Wichita, KS

Is ACO-1 filed? \_\_\_\_\_ If not, is well log attached? \_\_\_\_\_

Producing formation \_\_\_\_\_ Depth to top \_\_\_\_\_ bottom \_\_\_\_\_ T.D. 4400

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				10 3/4	N/A	
				4 1/2	4400	3300

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used state, the character of same and depth placed, from feet to feet each set. Plug back 4400, sand from 4400 to 4324, 4sx cement from 4326 to 4290, Allied pump in 4sx hull, 15sx jell, 110sx cement, 60-40 POZ, 2% Jell, 3sx hull, 15sx jell, 135sx cement, com. 2% CC

Van Gieson and Jay Kasperek on location

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Clarke Corp. License No. 5105

Address P.O. Box 187, Medicine Lodge, KS 67104

STATE OF Kansas COUNTY OF Barber, ss.

Elmo Morgenstern (employee of operator) or (operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well, and I hereby certify that the same are true and correct, so help me God.

DEC 16 1985

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104

12-16-85 CONSERVATION DIVISION  
Wichita, Kansas

SUBSCRIBED AND SWORN TO before me this 11 day of December, 1985

Notary Public

My Commission expires: June 29, 1987